



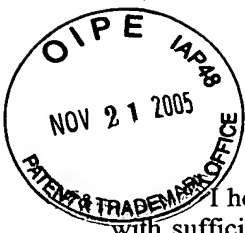
HW

| | | | |
|--|----------------------|------------------------|-------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/810,625 | |
| | Filing Date | March 29, 2004 | |
| | First Named Inventor | Katsutoshi OHTA et al. | |
| | Group Art Unit | 3683 | |
| | Examiner Name | Sy, Mariano Ong | |
| Total Number of Pages in This Submission | | Attorney Docket Number | 740819-1057 |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Luan C. Do, Reg. No. 38,434 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128 |
| Signature | |
| Date | November 17, 2005 |

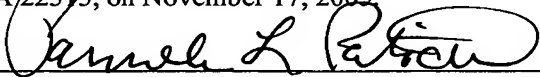
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| November 17, 2005 Date | Signature Pamela L. Patrick Typed or printed name |



Docket No. 740819-1057

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Pamela L. Patrick

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|----------------------------------|-----------------------------|
| In re Patent Application of: |) |
| Katsutoshi OHTA et al. |) Group Art Unit: 3683 |
| Serial No. 10/810,625 |) Examiner: Sy, Mariano Ong |
| Filed: March 29, 2004 |) Confirmation No. 9858 |
| For VIBRATION PROOF MOUNT DEVICE |) November 17, 2005 |

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed August 17, 2005, please consider the amendments and remarks in connection with the above-identified application as follows.